

**Please print
in black ink only**

Ch 1
9/27/04

Albuquerque/Bernalillo County Library System Library Card Application

Full Name: _____
Last name First name Full Middle Name

Permanent Address: _____
Street Apt.

City State Zip code

Home phone: () _____ **Business phone:** () _____

Birthday: ____/____/____ **Driver's license/ID #:** _____ **State:** _____

Please notify me of my overdues and holds by: (check one only)

☐ e-mail address: _____ ☐ Phone ☐ USPS _____

By signing this form, I accept financial responsibility for all materials checked out on this card with or without my consent, and for all fines and fees incurred in the use of this card. I certify that all information given is accurate and true to the best of my knowledge. **I agree to abide by the rules and policies of the Library System.**

Cardholder's Signature: _____ **Date:** _____

**If under 18, the following must be completed by parent or legal guardian:
(Please Print)**

Parent/Guardian: _____
Last First Full middle name

Parent's current picture identification #: _____ **State:** _____

By signing this form, I understand that I am responsible for monitoring the materials checked out by the child named above. I understand that I am financially responsible for materials checked out by the child named above. **I agree to abide by the rules and policies of the Library System.**

Signature of parent or guardian: _____ **Date:** _____

To use Library internet computers, a SmartCard™ is required. To obtain a SmartCard™, please read and complete the form on the back of this sheet.

OFFICIAL USE ONLY

Card # 29075 _____

Agency _____ Initials _____

Expiration Date _____

	Add
	Replacement
	Update
	SmartCard™
	Replace Smartcard™

7	Customer	
8	Child	
9	Youth	
10	Adult Limit	
11	Teacher	
6	J Only	
12	Non-res.	

Individual Computer Use and SmartCard™ Agreement

There is a \$3.00 fee due with this application. There is a \$5.00 replacement fee for ALL lost SmartCards™.

➔ **Step 1:** After reading our Computer Use Policy, please fill out one of the boxes below:

Age 17 and Over Agreement

I understand and agree to abide by the Albuquerque/Bernalillo County Library System's **Computer Use Policy** and to comply with all posted rules. I also agree to restrict the use of this card to my personal use and to immediately report its loss to the Library Staff. I understand that there will be a fee charged for a replacement card and that the Library accepts no responsibility for SmartCards™ lost or left in library equipment. I also understand that if I choose to save favorite bookmarks, there is no assurance of confidentiality.

Name [please print] _____

Please select a Personal Password [4-8 letters or numbers, Case Sensitive] _____

Signature _____ Today's Date _____

OR

Required Parental Permission for Users under Age 17

As the parent or legal guardian of the minor child (under age 17), I have read and agree to the Albuquerque/Bernalillo County Library System's Computer Use Policy. I also agree to restrict the use of this card to my child's use and to immediately report its loss to the Library Staff. I accept responsibility and agree to allow my child (under age 17) to use the Internet according to the level I indicate on this form. I understand that there will be a fee charged for a replacement card and that the Library accepts no responsibility for SmartCards™ lost or left in library equipment. I also understand that there is no assurance of confidentiality if my child saves favorite bookmarks.

Computer User's Name [please print] _____

Parent/Guardian Name [please print] _____

Please select a Personal Password [4-8 letters or numbers, Case Sensitive] _____

Signature of Parent/Guardian _____

Signature of Computer User _____ Today's Date _____

Fee Waiver Request: I request a waiver of the \$3.00 SmartCard™ fee for my child, who qualifies for the free lunch program at _____ School.

➔ **Step 2:** I select for myself ☐ my child ☐ the following level of Internet access on the Albuquerque/Bernalillo County Library System's computers:

- | | | | |
|----------------------------------|--------------------------|-----------------------------------|--------------------------|
| Level 1 – Safe Harbor | <input type="checkbox"/> | Level 3 – Least Restricted Access | <input type="checkbox"/> |
| Level 2 – Most Restricted Access | <input type="checkbox"/> | Level 4 - Open Access | <input type="checkbox"/> |

Printing costs .15/page. Funds *must* be added to the SmartCard in order to print.

Do you want to add funds for printing costs? Yes _____ No _____ How much? _____
(\$1.00 increments only)

➔ **Step 3:** Save favorite bookmarks on my SmartCard™: yes ☐ no ☐

Card # 29075

STAFF USE ONLY:	
Replaced Card <input type="checkbox"/>	Staff Initials <input type="text"/>
\$ Added <input type="checkbox"/>	SMARTCARD ONLY <input type="checkbox"/>